

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | BA | 70385 | |
| O.I.P.E. CLASSIFIER | (b) | | |
| FORMALITY REVIEW | CVS | 6233 | 09/15/00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)..... Canceled A Appeal
+ Restricted O Objected

BEST AVAILABLE COPY

| Claim | Final | Original | Date |
|-------|-------|----------|------|
| 1 | ✓ | 10/27/01 | |
| 2 | ✓ | 4/1/02 | |
| 3 | ✓ | 11/11/02 | |
| 4 | ✓ | 11/11/02 | |
| 6 | ✓ | 11/11/02 | |
| 8 | ✓ | 11/11/02 | |
| 9 | ✓ | 11/11/02 | |
| 10 | ✓ | 11/11/02 | |
| 11 | ✓ | 11/11/02 | |
| 13 | ✓ | | |
| 14 | ✓ | | |
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| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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